

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000029873

FILED
Apr 11, 2002 8:00 AM
Secretary of State

Entity Name: VALUE TRIPS, INC.

Current Principal Place of Business:

550 N REO ST, SUITE 300
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

P O BOX 262515
TAMPA, FL 336852515

New Mailing Address:

P O BOX 340035
TAMPA, FL 336940035

FEI Number: 59-3580662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSELLA, ANTHONY
550 N REO ST, SUITE 300
TAMPA, FL 33609

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARSELLA, ANTHONY
Address: 550 N. REO ST., STE 300
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY MARSELLA

D

04/11/2002

Electronic Signature of Signing Officer or Director

_____ Date